

**FEC FORM 5****REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation Planned Parenthood Action Fund Inc.		3. FEC Identification Number <b>C</b> C90005471
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 434 West 33rd Street		
(c) City, State and ZIP Code New York NY 10001		
2. <b>Corporate filers only</b>	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Individual filers only</b>	Name of Employer	Occupation

## 4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

## 5. COVERING PERIOD: FROM

M	M	/	D	D	/	Y	Y	Y	Y
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THROUGH

M	M	/	D	D	/	Y	Y	Y	Y
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6. TOTAL CONTRIBUTIONS .....

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

22159.62

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Jankie Beharry

08/26/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Planned Parenthood Action Fund Inc.

Full Name (Last, First, Middle Initial) of Payee  
Alliance FM

Date

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 8Mailing Address  
133 Industrial Avenue

Amount

13500.00

City  
HasbrouckState  
NJZip Code  
07604Purpose of Expenditure  
Political AdvertisingCategory/  
Type

24A

Office Sought:

☐ House

State: \_\_\_\_\_

Presidential

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
John McCainDisbursement For:  
2008☒ Primary☐ General☐ Other (specify) \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought

234154.25

Full Name (Last, First, Middle Initial) of Payee  
Dr. Don's Buttons

Date

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 8Mailing Address  
3906 W. Morrow Drive

Amount

1959.62

City  
GlendaleState  
AZZip Code  
85308Purpose of Expenditure  
Stickers and ButtonsCategory/  
Type

24E

Office Sought:

☐ House

State: \_\_\_\_\_

Presidential

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
Barack ObamaDisbursement For:  
2008☒ Primary☐ General☐ Other (specify) \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought

234154.25

Full Name (Last, First, Middle Initial) of Payee  
Linemark

Date

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 8Mailing Address  
1220 Caraway Court Suite 1040

Amount

6700.00

City  
LargoState  
MDZip Code  
20774Purpose of Expenditure  
T-ShirtsCategory/  
Type

24E

Office Sought:

☐ House

State: \_\_\_\_\_

Presidential

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:  
Barack ObamaDisbursement For:  
2008☒ Primary☐ General☐ Other (specify) \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought

234154.25

(a) SUBTOTAL of Itemized Independent Expenditures .....

22159.62

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....  
(carry total from last page forward to Line 7)

22159.62